Harrison Recreation Department HARRISON JUNIOR SOCCER LEAGUE 2016 DIVISION 2nd – 8th

Player's Name				Sex	Phone				
Address		Tow		State			Zij	Zip	
School Child Attends					G	rade i	n Sep	ot. 2016	!
PLEASE	PRINT PA	ARENT'S EMAI	II. ADDRESS IN	ROXES	PROVIDEI) REL	οw		
						J DELL			
CIRCLE ONE: OTHER_	.COM				. . G	GOV			
Date of Birth: Month	Day	Year	Parent Harri	son 201	6 ID #		_ (red	quired 1	to play)
Health Insurance Company _					No				
We, the parent's of	ne Town/ d any mi	Village of Ha ishap occur.	rrison, Recrea	ation De	partment	and r	elate	d Leagi	ue personnel
Print Father's Name			Father's S	ignature	2				
Print Mother's Name			Mother's S	Signatuı	re				
Parents: I will volunteer as:	Head	Coach Yes N	No Name				Work	:#	
(Please circle one)	Emai	il							
	Asst. Coach Yes No Name					Cell#			
	Emai	il							
Sponsor: \$150	Name	e of Sponsor_					-		
Patron: \$25 Donation	- Additio		team to be pu	t on un	iform				
Make checks payable to: T	Cown/Vil	lage of Harris	on						
Fee: \$55 for 1 c \$75 <u>per</u>		for each add registration ar							
Registration & fee can be mailed Community Center 251 Underh Uniforms: Parents must supply For further information please	ill Avenue black sho	e, West Harriso orts, shin guard	on, NY 10604 ls & ball. Leag		•				· Leo Mintzer
OFFICE USE ONLY: CHECK #		AMOUNT	RECEIV	ED BY_		D	ATE_		